

STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

PROGRESS SHEET

COMPUTER INPUT

☐ APPLICATION  
☐ PERMIT  
☐ CERTIFICATE  
☐ OTHER

☒ SURFACE WATER ☐ GROUND WATER

|  |  |   |                       |                                    |  |
|--|--|---|-----------------------|------------------------------------|--|
| NAME<br>Carol Polhamus   |  |   |                       | TELEPHONE NO.<br>(360) 928-3239    |  |
| ADDRESS<br>PO Box 519  |  | (CITY)<br>Port Angeles  | (STATE)<br>Washington | (ZIP CODE)<br>98362-0519           |  |
| ASSIGNED TO  |  |   | TELEPHONE NO.         | DATE ASSIGNED                      |  |
| ADDRESS  |  | (CITY)  | (STATE)               | (ZIP CODE)                         |  |
| APPLICATION NO.<br><b>52-29754</b>   |  | PERMIT NO.  |                       | CERTIFICATION NO.                  |  |
| DATE AMENDED   |  | DATE CANCELLED  |                       | W.R.I.A. <b>18</b>                 |  |
| <b>APPLICATION</b>   |  |   |                       |                                    |  |
| DATE APPLICATION RECEIVED<br><b>7-9-98</b>                                       |  | INITIAL \$10.00 FEE RECEIVED<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |                       | DATE FEE RECEIVED<br><b>7/9/98</b> |  |
| STATEMENT OF ADDITIONAL EXAMINATION FEE \$                                       |  | DATE SENT   |                       | DATE RECEIVED                      |  |
| DATE RETURNED FOR COMPLETION OR CORRECTION                                       |  |   | DATE RECEIVED         |                                    |  |
| <b>TEMPORARY PERMIT</b>  |  |   |                       |                                    |  |
| APPROVED BY  |  |   |                       | DATE ISSUED                        |  |
| <b>PUBLICATION</b>   |  |   |                       |                                    |  |
| APPROVED BY  |  | DATE APPROVED   |                       | DATE NOTICE SENT                   |  |
| PROTESTED BY AND DATE  |  |   |                       |                                    |  |
| DATE AFFIDAVIT RECEIVED  |  | CHECKED BY  | TIME EXPIRED          | DATE AFFIDAVIT RECEIVED            |  |
|  |  |   |                       |                                    |  |
| <b>DEPARTMENT OF GAME AND FISHERIES REPORT</b>                                   |  |   |                       |                                    |  |
| APPROVED   |  | PROVISO   |                       | PROTEST                            |  |
|  |  |   |                       |                                    |  |
| <b>EXAMINATION</b>   |  |   |                       |                                    |  |
| DATE EXAMINATION MADE  |  | MADE BY   |                       | DATE REPORT OF EXAM. WRITTEN       |  |
|  |  |   |                       |                                    |  |
| DATE PERMIT FEE REQUESTED  |  | AMOUNT DUE  |                       | DATE RECEIVED                      |  |
|  |  |   |                       |                                    |  |
| <b>PERMIT</b>  |  |   |                       |                                    |  |
| PERMIT APPROVED BY   |  | DATE APPROVED   |                       | PERMIT NO.                         |  |
|  |  |   |                       |                                    |  |
| <b>BEGINNING OF CONSTRUCTION</b>   |  |   |                       |                                    |  |
| DATE NOTICE SENT   |  | DATE FILED  |                       | EXTENSION FEE                      |  |
|  |  |   |                       |                                    |  |
| EXTENDED TO  |  |   | EXTENDED TO           |                                    |  |
|  |  |   |                       |                                    |  |
| <b>WELL DRILLER'S AND/OR CONSTRUCTION REPORT</b>                                 |  |   |                       |                                    |  |
| DATE SENT  |  |   | DATE FILED            |                                    |  |
|  |  |   |                       |                                    |  |
| <b>COMPLETION OF CONSTRUCTION</b>  |  |   |                       |                                    |  |
| DATE NOTICE SENT   |  | DATE FILED  |                       | EXTENSION FEE                      |  |
|  |  |   |                       |                                    |  |
| EXTENDED TO  |  |   | EXTENDED TO           |                                    |  |
|  |  |   |                       |                                    |  |
| <b>PROOF OF APPROPRIATION</b>  |  |   |                       |                                    |  |
| DATE SENT  |  | DATE FILED  |                       | EXTENSION FEE                      |  |
|  |  |   |                       |                                    |  |
| DATE CERTIFICATE FEE REQUESTED   |  | AMOUNT DUE  |                       | DATE RECEIVED                      |  |
|  |  |   |                       |                                    |  |
| DATE APPROVED FOR CERTIFICATE  |  | APPROVED BY   |                       |                                    |  |
|  |  |   |                       |                                    |  |
| <b>CERTIFICATION</b>   |  |   |                       |                                    |  |
| PROOF EXAM. REQUIRED<br><input type="checkbox"/> YES <input type="checkbox"/> NO |  | CERTIFICATE NUMBER  |                       | DATE ISSUED                        |  |
|  |  |   |                       |                                    |  |

REMARKS